

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NEA Fund for Children and Public Education

ADDRESS (number and street)

1201 16th Street NW Ste 418

☐ Check if different than previously reported. (ACC)

Washington

DC

20036-3290

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00003251

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
02 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
02 28 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael McPherson

Signature of Treasurer

Michael McPherson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
03 13 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NEA Fund for Children and Public Education

Report Covering the Period: From: M M / D D / Y Y Y Y Y 02 / 01 / 2014 To: M M / D D / Y Y Y Y Y 02 / 28 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		1869791.85
(b) Cash on Hand at Beginning of Reporting Period.....	1837710.34	
(c) Total Receipts (from Line 19) .....	97052.66	192142.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1934763.00	2061933.96
7. Total Disbursements (from Line 31) .....	132960.20	260131.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1801802.80	1801802.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NEA Fund for Children and Public Education

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 02 / 01 / 2014

To:

 M M / D D / Y Y Y Y  
 02 / 28 / 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1759.68

4059.68

(ii) Unitemized .....

93292.98

186082.43

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

95052.66

190142.11

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

95052.66

190142.11

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

2000.00

2000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

97052.66

192142.11

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

97052.66

192142.11

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	960.20	1381.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	960.20	1381.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	117000.00	243000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	750.00
29. Other Disbursements .....	15000.00	15000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	132960.20	260131.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	132960.20	260131.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	95052.66	190142.11
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	750.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	95052.66	189392.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	960.20	1381.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	960.20	1381.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. KERRIE A DALLMAN**

Mailing Address 11766 MOBILE ST

City  
DENVER

State  
CO

Zip Code  
80022-6217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Colorado Education Association

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2014

**Transaction ID : A2014-344946**

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

**B. KEVIN F GILBERT**

Mailing Address 707 WICKLOW PL

City

RIDGELAND

State

MS

Zip Code

39157-1237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CLINTON COMMUNITY SCHOOLS

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2014

**Transaction ID : A2014-345274**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. KENNETH B HAINES**

Mailing Address 11400 SEQUOIA LN

City

BELTSVILLE

State

MD

Zip Code

20705-1465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRINCE GEORGE COUNTY PUBLIC SCHOOL

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.67

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2014

**Transaction ID : A2014-345389**

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

303.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. KENNETH B HAINES**

Mailing Address 11400 SEQUOIA LN

City

BELTSVILLE

State

MD

Zip Code

20705-1465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRINCE GEORGE COUNTY PUBLIC SCHOOL

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

278.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4			2	0	1	4		

Transaction ID : A2014-356550

Amount of Each Receipt this Period

26.68

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B. KENNETH B HAINES**

Mailing Address 11400 SEQUOIA LN

City

BELTSVILLE

State

MD

Zip Code

20705-1465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRINCE GEORGE COUNTY PUBLIC  
SCHOOLS

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

778.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	1	4		

Transaction ID : A2014-345390

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. BRITT HALL**

Mailing Address S69W13499 BRISTLECONE LN

City

MUSKEGO

State

WI

Zip Code

53150-3331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAUKESHA COUNTY TECHNICAL COLLEGE

Occupation

TCHR/INSTRUCT/PRG ASST

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	1	4		

Transaction ID : A2014-345400

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

556.68

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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 Detailed Summary Page

 FOR LINE NUMBER: PAGE 9 OF 26  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. FREDERIKA S JENNER**

Mailing Address 745 OLD WILMINGTON RD

City

HOCKESSIN

State

DE

Zip Code

19707-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RED CLAY CONSOLIDATED SCH DIST

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

204.34

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	5		2	0	1	4		

Transaction ID : A2014-345603

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. FREDERIKA S JENNER**

Mailing Address 745 OLD WILMINGTON RD

City

HOCKESSIN

State

DE

Zip Code

19707-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RED CLAY CONSOLIDATED SCH DIST

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

324.34

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8		2	0	1	4		

Transaction ID : A2014-345604

Amount of Each Receipt this Period

120.00

IN KIND

Full Name (Last, First, Middle Initial)

**C. SANDRA J KORTJOHN**

Mailing Address 22436 BLUE LAKE CT SE

City

YELM

State

WA

Zip Code

98597-9377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YELM SD #2

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	8		2	0	1	4		

Transaction ID : A2014-345751

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

## **A. REBECCA S PRINGLE**

Mailing Address 4552 MAGNOLIA MANOR WAY

City

HARRISBURG

State

VA

Zip Code

22312-1400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONAL EDUCATION ASSOCIATION

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : A2014-346345

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. BRENDA K ROBINSON**

Mailing Address 6020 DENHAM DR

City

LITTLE ROCK

State

AR

Zip Code

72209-6335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PULASKI COMMUNITY SCHOOL DIST

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : A2014-346468

Amount of Each Receipt this Period

40.00

IN KIND

Full Name (Last, First, Middle Initial)

## **C. BRENDA K ROBINSON**

Mailing Address 6020 DENHAM DR

City

LITTLE ROCK

State

AR

Zip Code

72209-6335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PULASKI COMMUNITY SCHOOL DIST

Occupation

CLASSROOM TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : A2014-346469

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. JOHN C STOCKS**

Mailing Address 1201 16TH ST NW

City  
WASHINGTON

State Zip Code  
DC 20036-3201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL EDUCATION ASSOCIATION

Occupation  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2014

**Transaction ID : A2014-360400**

Amount of Each Receipt this Period

380.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

380.00

1759.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 26

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Michaud for Congress**

Mailing Address 213 Lisbon St

City

Lewiston

State

ME

Zip Code

04240

FEC ID number of contributing  
federal political committee.

C

C00367821

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2014

**Transaction ID : A2014-10695**

Amount of Each Receipt this Period

2000.00

Refund of September 2013 Contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

2000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Manufacturers & Traders Trust Co.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

Mailing Address 40 East Pratt St.

City	State	Zip Code
Baltimore	MD	21202

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Category/  
Type

Transaction ID : B488346

Amount of Each Disbursement this Period

236.20
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

236.20
--------

TOTAL This Period (last page this line number only).....▶

236.20
--------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Alaska Democratic Party**

Mailing Address 2602 Fairbanks St

City	State	Zip Code
Anchorage	AK	99503

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : B487317

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Ron Barber for Congress**

Mailing Address PO Box 57715

City	State	Zip Code
Tucson	AZ	85732

Purpose of Disbursement  
Contribution

Candidate Name

Ron Barber

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AZ District: 02

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : B487335

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kirkpatrick for Arizona**

Mailing Address PO Box 12011

City	State	Zip Code
Casa Grande	AZ	85130

Purpose of Disbursement  
Contribution

Candidate Name

Ann Kirkpatrick

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AZ District: 01

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : B487336

Amount of Each Disbursement this Period

3000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

11000.00
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 26

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

## **A. Kyrsten Sinema for Congress**

Mailing Address PO Box 25879

City State Zip Code  
 Tempe AZ 85285

Purpose of Disbursement  
 Contribution

Candidate Name

**Kyrsten Sinema**

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 09

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 02 19 2014

**Transaction ID : B487337**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

## **B. Citizens for Waters**

Mailing Address 3700 Wilshire Blvd. Ste. 1050-B

City State Zip Code  
 Los Angeles CA 90010

Purpose of Disbursement  
 Contribution

Candidate Name

**Maxine Waters**

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 43

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 02 19 2014

**Transaction ID : B487319**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Perlmutter for Congress**

Mailing Address 3440 Youngfield Street #264

City State Zip Code  
 Wheat Ridge CO 80033

Purpose of Disbursement  
 Contribution

Candidate Name

**Ed Perlmutter**

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CO District: 07

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 02 19 2014

**Transaction ID : B487325**

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Udall for Colorado**

Mailing Address PO Box 40158

City	State	Zip Code
Denver	CO	80204

Purpose of Disbursement  
Contribution

011

Candidate Name

Mark Udall

Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487324

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Committee for A Democratic Future**

Mailing Address 7240 Evans Mill Rd

City	State	Zip Code
McLean	VA	22101

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487332

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Rosa DeLauro**

Mailing Address 12 Trumbull Street

City	State	Zip Code
New Haven	CT	06511

Purpose of Disbursement  
Contribution

011

Candidate Name

Rosa DeLauro

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487333

Amount of Each Disbursement this Period

5000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Florida Delivers Leadership PAC**

Mailing Address P.O. Box 70980

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : B487331

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Democrats Win Seats (DWS PAC)**

Mailing Address PO Box 83142

City	State	Zip Code
Gaithersburg	MD	20883

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : B487318

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Graham For Congress**

Mailing Address PO Box 310

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement  
Contribution

Candidate Name

Gwen Graham

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: FL District: 02

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : B487315

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

11000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Graham For Congress**

Mailing Address PO Box 310

City	State	Zip Code
Tallahassee	FL	32302

Purpose of Disbursement  
Contribution

011

Candidate Name

Gwen Graham

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487316

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Braley for Iowa**

Mailing Address PO Box 856

City	State	Zip Code
Des Moines	IA	50304

Purpose of Disbursement  
Contribution

011

Candidate Name

Bruce Braley

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487321

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Robin Kelly for Congress**

Mailing Address PO Box 6953

City	State	Zip Code
Chicago	IL	60680

Purpose of Disbursement  
Contribution

011

Candidate Name

Robin Kelly

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487314

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Alison for Kentucky**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address 340 Democrat Drive

City	State	Zip Code
Frankfort	KY	40601

Purpose of Disbursement  
Contribution

011

**Transaction ID : B487334**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**Alison L Grimes**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District:

Full Name (Last, First, Middle Initial)

**B. Friends of Mary Landrieu Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address 700 13th Street NW #600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Contribution

011

**Transaction ID : B487320**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**Mary L Landrieu**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: LA District:

Full Name (Last, First, Middle Initial)

**C. Cummings for Congress Campaign Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address PO Box 1631

City	State	Zip Code
Baltimore	MD	21203

Purpose of Disbursement  
Contribution

011

**Transaction ID : B487327**

Amount of Each Disbursement this Period

4000.00
---------

Candidate Name

**Elijah E Cummings**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 07

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Donna Edwards for Congress**

Mailing Address P.O. Box 441153

City	State	Zip Code
Fort Washington	MD	20749

Purpose of Disbursement  
Contribution

011

Candidate Name

Donna Edwards

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487329

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**B. Hoyer for Congress**

Mailing Address 700 13th Street NW #600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Contribution

011

Candidate Name

Steny H Hoyer

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487328

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. Dutch Ruppersberger for Congress**

Mailing Address 22 West Padonia Road Suite C-141

City	State	Zip Code
Timonium	MD	21093

Purpose of Disbursement  
Contribution

011

Candidate Name

Dutch Ruppersberger

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2014

Transaction ID : B487323

Amount of Each Disbursement this Period

3000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Friends of John Sarbanes**

Mailing Address PO Box 6854

City Towson	State MD	Zip Code 21285
----------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**John P. Sarbanes**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

**Transaction ID : B487322**

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**B. Van Hollen for Congress**

Mailing Address 10537 St. Paul St.

City Kensington	State MD	Zip Code 20895
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Chris Van Hollen**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

**Transaction ID : B487326**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kildee for Congress Committee**

Mailing Address P.O. Box 13033

City Flint	State MI	Zip Code 48501
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Purpose of Disbursement  
Contribution

011

Candidate Name

**Dale E Kildee**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

**Transaction ID : B487509**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8000.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

NEA Fund for Children and Public Education

MM / DD / YYYY  
02 / 19 / 2014

Category/  
Type

3000.00

State: MN District: 08

Category/  
Type

State:  District:

Category/  
Type

State: OR District:

9000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Tenn Political Action Committee Inc (Tenn PAC)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address 228 S Washington Street Suite 115

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : B487330**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

5000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Full Name (Last, First, Middle Initial)

**B. Texas Democratic Party**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address 4818 East Ben White Blvd. Ste. 104

City	State	Zip Code
Austin	TX	78741

**Transaction ID : B487378**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

5000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Full Name (Last, First, Middle Initial)

**C. Castro for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

Mailing Address PO Box 544

City	State	Zip Code
San Antonio	TX	78292

**Transaction ID : B487507**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

1000.00
---------

Joaquin Castro

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District: 20

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEA Fund for Children and Public Education**

Full Name (Last, First, Middle Initial)

**A. Bobby Scott for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address P.O. Box 251

City	State	Zip Code
Newport News	VA	23607

**Transaction ID : B487377**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**Bobby Scott**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: VA District: 03

Full Name (Last, First, Middle Initial)

**B. Friends of Mark Warner**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address 201 North Union Street Suite 300

City	State	Zip Code
Alexandria	VA	22314

**Transaction ID : B487349**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

4000.00
---------

Candidate Name

**Mark Warner**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: VA District:

Full Name (Last, First, Middle Initial)

**C. M-PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Mailing Address 700 13th Street NW #600

City	State	Zip Code
Washington	DC	20005

**Transaction ID : B487313**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Denny Heck for Congress**

Mailing Address PO Box 235

City	State	Zip Code
Olympia	WA	98507

Purpose of Disbursement  
Contribution

011

Candidate Name

Dennis Heck

Category/  
Type
 Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : B487341

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. People for Derek Kilmer**

Mailing Address PO Box 1574

City	State	Zip Code
Gig Harbor	WA	98335

Purpose of Disbursement  
Contribution

011

Candidate Name

Derek Kilmer

Category/  
Type
 Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : B487343

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Enzi for US Senate**

Mailing Address PO Box 2775

City	State	Zip Code
Cody	WY	82414

Purpose of Disbursement  
Contribution

011

Candidate Name

Michael B Enzi

Category/  
Type
 Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : B487340

Amount of Each Disbursement this Period

1000.00
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00
117000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NEA Fund for Children and Public Education

Full Name (Last, First, Middle Initial)

**A. Wendy Davis Campaign**

Mailing Address PO Box 1039

City	State	Zip Code
Ft. Worth	TX	76101

Purpose of Disbursement  
P-2014 Governor TX

Candidate Name

Wendy Davis

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TX District:

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2014

Transaction ID : B487379

Amount of Each Disbursement this Period

15000.00
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**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00
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15000.00
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